

QUARTERLY STATEMENT

AS OF SEPTEMBER 30, 2015

	THE CONDITION AND AFFAIRS	OF THE
Martin'	's Point Generation	ons, LLC
	NAIC Company Code 12545	Employer's ID Number 20-4505084
(Prior Period)		
	, State of Do	omicile or Port of Entry Maine
Is HMO Federall	Property/Casualty [] Vision Service Corporation [] ly Qualified? Yes (X) No ()	Hospital , Medical and Dental Service or Indemnity [] Other []
	Commenced Bus	iness January 1, 2007
, Portland, Maine, US 04103		
	(Street and Number, City or Town, St	ate , Country and Zip Code)
		207-774-5801 Code) (Area Code) (Telephone Number)
,	uniber, City of Town, State, Country and Zip	(Alea Code) (Telephone Number)
03 04104-3040	(Street and Number or P.O. Box, City or 1	Fown, State, Country and Zip Code)
27 Northport Drive, Portland, Ma	aine, US 04103	
207-253-6224	(Street and Number, City	or Town, State, Country and Zip Code)
	e Number)	
nt.org		
holas Hadiaris		207-253-6224
	(Name)	(Area Code) (Telephone Number) (Extension) 207-253-6227
(E-Mail /	Address)	(Fax Number)
MD (Chief Executive Offic ef Operating Officer Health Jonatha Teresa A	OFFICERS cer) n Plans) Sandr OTHER OFFICERS an Easton Harvey, MD (Chief Med Anne Schulz (Chief Human Resour	Daniel Bruce Chojnowski# (Chief Financial Officer) a Lynn Monfiletto (Chief Operating Officer Delivery Service) ical Officer) rces Officer)
t	Is HMO Federal , Portland, Maine, US 04103 treet, Portland, Maine, US 0410 (Street and No. US 04104-5040 s 27 Northport Drive, Portland, Maine, Maine, Maine, US 04104-5040 s 27 Northport Drive, Portland, Maine, US 04104-5040 int. org	Property/Casualty [] Vision Service Corporation [] Is HMO Federally Qualified? Yes (X) No () Commenced Bus Portland, Maine, US 04103 (Street and Number, City or Town, State, Country and Zip US 04104-5040 (Street and Number or P.O. Box, City or Town of State and Number, City or Town of State and Number, City or Town of State and Number or P.O. Box, City or Town of State and Number or

The officers of this reporting entity, being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

Baniel Bruce Chojnowski#
Chief Financial Officer

Subscribed and sworn to before me this day of

Baniel Bruce Chojnowski#
Chief Financial Officer

a. Is this an original filing?

Yes (X) No ()

b. If no: 1. State the amendment number

2. Date filed

3. Number of pages attached

ASSETS

	ASSETS	ı .			
		(Current Statement Dat	e	4
		1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Col. 1 minus Col. 2)	Prior Year Net Admitted Assets
	D. J.	04 550 007		04 550 007	00 000 474
1.	Bonds	34,552,027		34,552,027	20,632,174
2.	Stocks:				
	2.1 Preferred stocks				
	2.2 Common stocks	12,076,828		12,076,828	9,082,793
3.	Mortgage loans on real estate:				
	3.1 First liens				
	3.2 Other than first liens				
4.	Real estate:				
	4.1 Properties occupied by the company (less \$ encumbrances)				
	4.2 Properties held for the production of income (less \$encumbrances)				
	4.3 Properties held for sale (less \$encumbrances)				
5.	Cash (\$ 5,002,616) , cash equivalents (\$) and short-term investments (\$ 1,241,774)	6 244 390		6 244 390	18 057 362
6.	Contract loans (including \$premium notes)				
7.	Derivatives				
8.	Other invested assets				
9.	Receivables for securities				
	Securities lending reinvested collateral assets				
10.					
11.	Aggregate write-ins for invested assets				
12.	Subtotals, cash and invested assets (Line 1 through Line 11)				
13.	Title plants less \$				
14.	Investment income due and accrued	165,215		165,215	101,773
15.	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of collection	653,580	41,260	612,320	296,879
	15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$				
	15.3 Accrued retrospective premiums				
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers				
	16.2 Funds held by or deposited with reinsured companies				
	16.3 Other amounts receivable under reinsurance contracts				
17.	Amounts receivable relating to uninsured plans				
18.1	Current federal and foreign income tax recoverable and interest thereon				
18.2	Net deferred tax asset				
19.	Guaranty funds receivable or on deposit				
20.	Electronic data processing equipment and software				
21.	Furniture and equipment, including health care delivery assets (\$)				
22.	Net adjustment in assets and liabilities due to foreign exchange rates				
23.	Receivables from parent, subsidiaries and affiliates				3,680,351
24.	Health care (\$ 11,950,000) and other amounts receivable	18,614,902	6,664,902	11,950,000	10,987,043
25.	Aggregate write-ins for other-than-invested assets				
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Line 12 to Line 25)	72,306,942	6,706,162	65,600,780	62,838,375
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts				
28.	Totals (Line 26 and Line 27)	72,306,942	6,706,162	65,600,780	62,838,375
	A ACTUALTY IN				
1101.	LS OF WRITE-INS				
1102. 1103.					
1198. 1199.	Summary of remaining write-ins for Line 11 from overflow page Totals (Line 1101 through Line 1103 plus Line 1198) (Line 11 above)				
	· · · · · · · · · · · · · · · · · · ·				
2501. 2502.					
2503.	Summary of remaining write-ins for Line 25 from overflow page				
	Totals (Line 2501 through Line 2503 plus Line 2598) (Line 25 above)				

LIABILITIES, CAPITAL AND SURPLUS

			Current Period		Prior Year
	+	1	2	3	4
		Covered	Uncovered	Total	Total
1.	Claims unpaid (less \$reinsurance ceded)				
2.	Accrued medical incentive pool and bonus amounts.				
3.	Unpaid claims adjustment expenses	690,926		690,926	553,202
4.	Aggregate health policy reserves, including the liability of \$				
5.	Aggregate life policy reserves				
6.	Property/casualty unearned premium reserve				
7.	Aggregate health claim reserves				
8.	Premiums received in advance				
9.	General expenses due or accrued. Current federal and foreign income tax payable and interest thereon (including \$	172,104		172,104	1,400,003
10.1	realized gains (losses)) Net deferred tax liability				
10.2	Ceded reinsurance premiums payable .				
11. 12.	Amounts withheld or retained for the account of others				
13. 14.	Remittances and items not allocated Borrowed money (including \$				
14.	Borrowed money (including \$				
15.	Amounts due to parent, subsidiaries and affiliates.	2,698,975		2,698,975	
16.	Derivatives				
17.	Payable for securities				
18.	Payable for securities lending				
19.	Funds held under reinsurance treaties (with \$authorized reinsurers, \$				
20.	Reinsurance in unauthorized and certified (\$) companies				
21.	Net adjustments in assets and liabilities due to foreign exchange rates				
22.	Liability for amounts held under uninsured plans				
23.	Aggregate write-ins for other liabilities (including \$				
24.	Total liabilities (Line 1 to Line 23)				
25.	Aggregate write-ins for special surplus funds		XXX	1,476,848	
26.	Common capital stock	XXX	XXX		
27.	Preferred capital stock	XXX	XXX	400 000 000	
28.	Gross paid in and contributed surplus.	XXX	XXX	109,000,000	
29.	Surplus notes	XXX	XXX		
30.	Aggregate write-ins for other-than-special surplus funds	XXX	XXX	(00, 404, 500)	
31.	Unassigned funds (surplus).	XXX	XXX	(82, 164, 589)	(65,299,824)
32.	Less treasury stock, at cost:	VVV	VVV		
	32.1	XXX	XXX		
33.	Total capital and surplus (Line 25 to Line 31 minus Line 32)	XXX	XXX	28,312,259	
	Total Capital and Surplus (Line 25 to Line 37 minus Line 32) Total Liabilities, capital and surplus (Line 24 and Line 33)	XXX	XXX	65,600,780	
J4.	Total Liabilities, capital and surplus (Line 24 and Line 33)	***	***	03,000,700	02,000,070
DETAI	LS OF WRITE-INS				
2301. 2302.					
2303 . 2398 .	Summary of remaining write-ins for Line 23 from overflow page				
	Totals (Line 2301 through Line 2303 plus Line 2398) (Line 23 above)				
	Federal Affordable Care Act Assessment	XXX	XXX	1,476,848	1 . 1
2502. 2503.	Cummons of compliance write inc for Line 25 from everflow page	XXX XXX	XXX XXX		
	Summary of remaining write-ins for Line 25 from overflow page Totals (Line 2501 through Line 2503 plus Line 2598) (Line 25 above)	XXX	X X X X X X	1,476,848	1,817,045
3004		V V V	VVV		
3001. 3002. 3003.		XXX XXX XXX	XXX XXX XXX		
	Summary of remaining write-ins for Line 30 from overflow page Totals (Line 3001 through Line 3003 plus Line 3098) (Line 30 above)	XXX XXX	XXX XXX		
	Calle (2000 through Enro 0000 pilo Enro 0000) (Enro 00 duotro)	ΛΛΛ	7,7,7		

STATEMENT OF REVENUE AND EXPENSES

		Current Y	ear to Date	Prior Year to Date	Prior Year Ended December 31
		1	2	3	4
		Uncovered	Total	Total	Total
1. N	Nember Months	XXX	303,106	267,008	360,916
2. N	let premium income (including \$non-health premium income)	XXX	204,329,968	170,096,183	231,553,922
3. (Change in unearned premium reserves and reserve for rate credits	XXX			
4. F	Fee-for-service (net of \$medical expenses)	XXX			
5. F	Risk revenue	XXX			
6. <i>A</i>	Aggregate write-ins for other health care related revenues	XXX			
7. A	Aggregate write-ins for other non-health revenues	XXX			
8. 1	otal revenues (Line 2 to Line 7)	XXX	204,329,968	170,096,183	231,553,922
9. H	and Medical: dospital/medical benefits		1		
10. (Other professional services				
11. (Outside referrals				
	mergency room and out-of-area				
	Prescription drugs				
14. <i>A</i>	Aggregate write-ins for other hospital and medical				
	ncentive pool, withhold adjustments and bonus amounts			, ,	
16. 8	Subtotal (Line 9 to Line 15)		199, 173, 348	164,904,074	224,428,110
Less: 17. N	let reinsurance recoveries				
18. T	otal hospital and medical (Line 16 minus Line 17)		199, 173, 348	164,904,074	224,428,110
19. N	Ion-health claims (net)				
20. (Claims adjustment expenses, including \$ 1,773,255 cost containment expenses		5,141,398	2,846,670	5,467,424
21. (Seneral administrative expenses.		14,451,214	13,390,638	19,799,147
22. li	ncrease in reserves for life and accident and health contracts (including \$ increase in eserves for life only)		1 260 000	2 590 900	
	otal underwriting deductions (Line 18 through Line 22)			183,722,182	
	Net underwriting gain or (loss) (Line 8 minus Line 23)		(15,804,992)		
	let investment income earned				
	let realized capital gains (losses) less capital gains tax of \$				
	let investment gains (losses) (Line 25 plus Line 26)				
28. N	let gain or (loss) from agents' or premium balances charged off [(amount recovered \$) amount charged off \$)]				
29. <i>F</i>	Aggregate write-ins for other income or expenses				
30. N	let income or (loss) after capital gains tax and before all other federal income taxes	XXX	(15,533,948)	(13,576,848)	(18,004,994)
31. F	ederal and foreign income taxes incurred	XXX			• • • • • • • • • • • • • • • • • • • •
32. N	let income (loss) (Line 30 minus Line 31)	XXX	(15,533,948)	(13,576,848)	(18,004,994)
DETAI	LS OF WRITE-INS				
0601. 0602.	LOOI MUITE IIIO	X X X X X X			
0603. 0698. 0699.	Summary of remaining write-ins for Line 6 from overflow page. Totals (Line 0601 through Line 0603 plus Line 0698) (Line 6 above)	XXX XXX XXX			
0701. 0702.		XXX XXX			
0703.	Company of consistent with in fact the 7 fear and for	XXX			
0798. 0799.	Summary of remaining write-ins for Line 7 from overflow page. Totals (Line 0701 through Line 0703 plus Line 0798) (Line 7 above)	X X X X X X			
1401. 1402.					
1402. 1403. 1498.	Summary of remaining write-ins for Line 14 from overflow page				
1499.	Totals (Line 1401 through Line 1403 plus Line 1498) (Line 14 above)				
2901. 2902.					
2903. 2998.	Summary of remaining write-ins for Line 29 from overflow page				
2999.	Totals (Line 2901 through Line 2903 plus Line 2998) (Line 29 above)				

STATEMENT OF REVENUE AND EXPENSES (continued)

		1	2	3
	CAPITAL AND SURPLUS ACCOUNT	Current Year To Date	Prior Year To Date	Prior Year Ended December 31
33.	Capital and surplus prior reporting year	34,517,221	17,706,845	17,706,845
34.	Net income or (loss) from Line 32	(15,533,948)	(13,576,848)	(18,004,994)
35.	Change in valuation basis of aggregate policy and claims reserves			
36.	Change in net unrealized capital gains (losses) less capital gains tax of \$	(1,166,147)	(369,066)	(332, 199)
37.	Change in net unrealized foreign exchange capital gain or (loss)			
38.	Change in net deferred income tax			
39.	Change in nonadmitted assets.	(504,867)	(1,937,703)	(3,352,431)
40.	Change in unauthorized and certified reinsurance			
41.	Change in treasury stock			
42.	Change in surplus notes			
43.	Cumulative effect of changes in accounting principles			
44.	Capital Changes:			
	44.1 Paid in	11,000,000	19,000,000	38,500,000
	44.2 Transferred from surplus (Stock Dividend)			
	44.3 Transferred to surplus.			
45.	Surplus adjustments:			
	45.1 Paid in			
	45.2 Transferred to capital (Stock Dividend)			
	45.3 Tranferred from capital			
46.	Dividends to stockholders.			
47.	Aggregate write-ins for gains or (losses) in surplus			
48.	Net change in capital and surplus (Line 34 to Line 47)	(6,204,962)	3,116,383	16,810,376
49.	Capital and surplus end of reporting period (Line 33 plus Line 48)	28,312,259	20,823,228	34,517,221
DET	AILS OF WRITE-INS			
4701				
4702				
4703				
4798	. Summary of remaining write-ins for Line 47 from overflow page .			
4799	. Totals (Line 4701 through Line 4703 plus Line 4798) (Line 47 above)			

CASH FLOW

		1	2	3
		Current Year To Date	Prior Year To Date	Prior Year Ended December 31
	Cash from Operations			
1.	Premiums collected net of reinsurance		172,563,700	
3.	Net investment income			
4.	Total (Line 1 through Line 3)	204,353,828		220,902,279
5.	Benefit and loss related payments	195,231,818		220,630,577
6. 7. 8.				24,451,693
9.	Federal and foreign income taxes paid (recovered) net of \$			
10.	Total (Line 5 through Line 9)	215,379,605	179,819,803	245,082,270
11.	Net cash from operations (Line 4 minus Line 10)	(11,025,777)	(11,316,781)	(24, 179, 991)
	Cash from Investments			
12.	Proceeds from investments sold, matured or repaid: 12.1 Bonds	, ,		, ,
	12.2 Stocks			
	12.5 Other invested assets 12.6 Net gains or (losses) on cash, cash equivalants and short-term investments			
		12,684	20,786,822	536
	12.8 Total investment proceeds (Line 12.1 through Line 12.7)	9,041,090	20,786,822	2,367,761
13.	Cost of investments acquired (long-term only): 13.1 Bonds			
	13.3 Mortgage loans			
	13.5 Other invested assets			
	13.7 Total investments acquired (Line 13.1 through Line 13.6)	27 339 712	29 307 823	32 491 127
11	Net increase or (decrease) in contract loans and premium notes			
15.	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	(18,298,622)	(8,521,001)	(30, 123, 366)
16	Cash provided (cashied):			
16.	Cash provided (applied): 16.1 Surplus notes, capital notes 16.2 Capital and paid in surplus, less treasury stock			38,500,000
	16.3 Borrowed funds			
	16.5 Dividends to stockholders	6,511,427		(2,709,361)
17.	Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	17,511,427	19,720,823	
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18.	Net change in cash, cash equivalents and short-term investments (Line 11 plus Line 15 plus Line 17)	(11,812,972)	(116,959)	(18,512,718)
19.	Cash, cash equivalents and short-term investments: 19.1 Beginning of year			
	19.2 End of period (Line 18 plus Line 19.1)	6,244,390	36,453,121	18,057,362
Note	: Supplemental disclosures of cash flow information for non-cash transactions:			
20.0				
20.0 20.0 20.0	003			
20.0				
20.0 20.0 20.0				

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1	Comprehensive (H	ospital and Medical)	4	5	6	7	8	9	10
		2	3	Medicare	Vision	Dental	Federal Employees Health	Title XVIII	Title XIX	
	Total	Individual	Group	Supplement	Only	Only	Benefits Plan	Medicare	Medicaid	Other
Total Members at end of:										
1. Prior Year	31,526							31,526		
2. First Quarter	32,892							32,892		
3. Second Quarter	33,998							33,998		
4. Third Quarter	35,194							35,194		
5. Current Year										
6. Current Year Member Months	303,106							303,106		
Total Member Ambulatory Encounters for Period:										
7. Physician.	356,304							356,304		
8. Non-Physician	167,192							167,192		
9. Total	523,496							523,496		
10. Hospital Patient Days Incurred	17,461							17,461		
11. Number of Inpatient Admissions.	3,599							3,599		
12. Health Premiums Written (a)	204,329,968							204,329,968		
13. Life Premiums Direct										
14. Property/Casualty Premiums Written										
15. Health Premiums Earned.	204,329,968							204,329,968		
16. Property/Casualty Premiums Earned										
17. Amount Paid for Provision of Health Care Services	193,862,818							193,862,818		
18. Amount Incurred for Provision of Health Care Services	199, 173, 348							199, 173, 348		

⁽a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 204,329,968

STATEMENT AS OF SEPTEMBER 30, 2015 OF THE Martin's Point Generations, LLC

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims

1 Account	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total
0399999 - Aggregate accounts not individually listed-covered	2,634,546					
0499999 - Subtotals						
0599999 - Unreported claims and other claim reserves						
0799999 - Total claims unpaid						
0899999 - Accrued medical incentive pool and bonus amounts .						

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

	Claims Paid \	Year to Date	Liability End of 0	Current Quarter	5	6 Estimated Claim	
	1	2	3	4		Reserve and Claim	
Line of Business	On Claims Incurred Prior to January 1 of Current Year	On Claims Incurred During the Year	On Claims Unpaid December 31 of Prior Year	On Claims Incurred During the Year	Claims Incurred in Prior Years (Columns 1 plus 3)	Liability December 31 of Prior Year	
Comprehensive (hospital and medical)							
2. Medicare Supplement							
3. Dental only							
4. Vision only							
Federal Employees Health Benefits Plan							
6. Title XVIII - Medicare	19,819,224	173,692,956	(49,068)	28,273,373		23,427,361	
7. Title XIX - Medicaid							
8. Other health							
9. Health subtotal (Line 1 to Line 8)	19,819,224	173,692,956	(49,068)	28,273,373		23,427,361	
10. Health care receivables (a)							
11. Other non-health							
12. Medical incentive pools and bonus amounts	875,589	603,389			875,589		
13. Totals (Line 9 minus Line 10 plus Line 11 plus Line 12)	20,694,813	173,168,005	(49,068)	29,797,459	20,645,745	24,437,861	

⁽a) Excludes \$ loans or advances to providers not yet expensed.

Summary of Significant Accounting Policies

A. Accounting Practices

The accompanying financial statements of Martin's Point Generations, LLC (the "Company") have been prepared in conformity with the National Association of Insurance Commissioners ("NAIC") Annual Statement Instructions and in accordance with accounting practices prescribed or permitted by the NAIC Accounting Practices and Procedures Manual, subject to any deviations prescribed or permitted by the Maine Bureau of Insurance (the "Bureau"). There were no deviations from NAIC prescribed or permitted by the Bureau in 2014 or

A reconciliation of the Company's net income and capital and surplus between NAIC SAP practices prescribed and permitted by the State of Maine is shown below:

	State of	Current	Prior
State Prescribed Practices	Domicile	Year	Year
Net Income, state basis (Page 4, Line 32, Colums 2 and 4)	ME	(15,533,948)	(18,004,994)
Net Income, NAIC SAP	ME	(15,533,948)	(18,004,994)
Surplus, state basis (Page 3, Line 33, Columns 3 and 4)	ME	28,312,259	34,517,221
Surplus, NAIC SAP	ME	28,312,259	34,517,221

B. Use of Estimates in the Preparation of the Financial Statements

Preparation of financial statements requires management to make estimates and assumptions that affect the amounts reported in the financial statements and accompanying notes. Actual results could differ from those estimates.

C. Accounting Policies

Expenses incurred in connection with acquiring new insurance business, including acquisition costs such as sales commissions, are charged to operations as incurred. Premiums paid by subscribers prior to the effective date are recorded on the balance sheet as advance premiums and subsequently credited to income as earned during the coverage period.

In addition, the Company uses the following accounting policies:

- (1) Short-term money market mutual funds are stated at market value and short-term bonds are stated at amortized cost.
- (2)Bonds are stated at amortized costs.
- (3) (4) Common stocks are stated at market value.
- The Company does not have any preferred stock
- (5)The Company does not have any mortgage loans.
- (6)The Company does not have any loan-backed securities.
- The Company does not have any investments in subsidiaries, controlled or affiliated companies. (7)
- The Company does not have investments in joint ventures, partnerships or limited liability (8)
- (9)The Company does not have any derivative instruments.
- $(\dot{1}0)$ The Company does not include anticapated investment income in calculating a premium deficiency.
- (11)The Company's reported unpaid claims are based on adjudicated claims in process of settlement. The amount of unreported claims is based on actuarial estimates. The claims adjustment expenses are estimated at approximately 2% of unpaid claims. Liabilities for unpaid claims and claims adjustment expense are based on assumptions and estimates, and while management believes such estimates are reasonable, the ultimate liability may be in excess of or less than the amount provided.
- (12)The Company does not have any capital assets and therefore no capitalization policy.
- The Company records pharmaceutical rebates receibable as a nonadmitted asset. (13)

2. Accounting Changes and Corrections of Errors: No changes or corrections

3. Business Combinations and Goodwill: Not applicable

4. Discontinued Operations: Not applicable

5. Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans

The Company has no investments in mortgage loans, including Mezzanine Real Estate Loans.

B. Debt Restructuring

The Company has no invested assets that are restructured debt.

C. Reverse Mortgages

The Company has no investments in reverse mortgages.

D. Loan-Backed Securities

The Company has no loan-backed securities.

E. Repurchase Agreements and/or Security Lending Transactions

The Company has no repurchase agreements or security lending transactions at September 30,2015.

F. Real Estate

- (1) The Company has no investment real estate.
- $\begin{tabular}{ll} \end{tabular} \begin{tabular}{ll} \end{tabular} The Company does not engage in retail land sales operations . \end{tabular}$

G. Low-Income Housing Tax Credit

The Company has no Low-Income Housing Tax Credits

H. Restricted Assets

The Company is required by law to maintain deposits with the States of Maine and New Hampshire. These deposit are in the form of a U. S. Treasury Bill and a Money Market Mutual Fund and are not exclusively under our control.

Total Gross	Total Gross		Total Gross	Percentage	Percentage
Restricted	Restricted		Current	Gross	Admitted
from	from		Year	Restricted to	Restricted to
Current	Prior	Increase /	Admitted	Total	Admitted
Year	Year	(Decrease)	Restricted	Assets	Assets
					0 031%
	Restricted from Current	Restricted Restricted from from Prior Year Year	Restricted from from Current Prior Increase / Year Year (Decrease)	Restricted Restricted Current from from Year Current Prior Increase / Admitted Year Year (Decrease) Restricted	Restricted Restricted Current Gross from from Year Restricted to Current Prior Increase / Admitted Total Year Year (Decrease) Restricted Assets

j. On Deposit with states \$610,929 \$611,530 (\$601) \$610,929 0.845% 0.931%

I. Working Capital Finance Investments

The Company has no working capital finance investments.

J. Offsetting and Netting of assets and Liabilities

The Company has no offsetting and netting of assets and liabilities at September 30, 2015.

K. Structured Notes

The Company has no structured notes at September 30, 2015.

6. Joint Ventures, Partnerships and Limited Liability Companies: Not applicable

7. **Investment Income:** No change

8. Derivative Instruments: Not applicable

9. Income Taxes: Not applicable

10. Information Concerning Parent, Subsidiaries and Affiliates:

At September 30, 2015 the Company reported \$2,698,975 due to its Parent. The due to is for current items generated in 2015 and will be settled in October 2015.

- 11. Debt: Not applicable
- 12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans:
 No change
- 13. Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations:
 - (1) The Company has no common stock.
 - (2) The Company has no preferred stock.
 - (3) The Company is not a stock company and is not subject to dividend restrictions.
 - (4) As noted above, no dividends were paid.
 - (5) Company is not a stock company and is not subject to dividend restrictions.
 - (6) Unassigned surplus funds are not restricted.
 - (7) There have been no advances to surplus.
 - (8) There are no shares of stock held for special purposes.
 - (9) The Company has a special surplus funds of \$1,476,848 for the Federal Affordable Care Act assessment payable in 2016.
 - (10) The Company has no surplus adjustments due to cumulative unrealized losses.
 - (11) The Company has not issued any surplus notes or debentures or similar obligations.
 - (12) The Company had no restatements due to prior quasi-reorganizations.
 - (13) The Company has not been involved in any quasi-reorganizations during the past 10 years.

14. Liabilities, Contingencies and Assessments

A. Contingent Commitments:

The Company has no contingent commitments.

B. Assessments:

The Company is subject to guaranty fund by the state in which it writes business. Guaranty fund assessments are accrued at the time of insolvencies.

C. Gain Contingencies:

The Company has no gain contingencies.

F. Claims related Extra Contractual Obligations and Bad Faith Losses Stemming from Lawsuits:

The Company has no lawsuits on claims in 2015.

E. Joint and Several Liabilities:

The Company has no joint and several liability arrangements at 09/30/2015.

F. All Other Contingencies:

The Company has no other contingencies and has no assets that it considers to be impaired.

- 15. Leases: Not applicable
- 16. Information About Financial Instruments With Off-Balance Sheet Risk And Financial Instruments With Concentrations of Credit Risk: No change
- 17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities
 - A. Transfers of receivables reported as Sales: Not Applicable
 - B. Transfer and Servicing of Financial Assets: Not applicable
 - C. Wash Sales: The Company had no Wash Sales during the period.
- 18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans: Not applicable
- 19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators: Not applicable

20. Fair Value Measurements:

Description for each class of asset	(Level 1)		(Level 2)		(Level 3)			Total
Assets at fair value Bonds								
U. S. Governments	\$ 18,443	982	\$	_	\$	_	\$	18,443,982
Industrial and Misc	ψ 10, 440	-	11,762	2,807	Ψ	-	Ψ	11,762,807
Special Rev./Assess. Oblig.		_	3,33	1,737		_		3,331,737
All Other Governments		-	1,013			-		1,013,501
Parent, Subsidiaries and Affiliates		-		-		-		-
Total Bonds	\$ 18,443	,982 \$	16,108	,045	\$	-	\$	34,552,027
Common Stock								
Industrial and Misc	\$ 12,076	,828	\$	-	\$	-	\$	12,076,828
Parent, Subsidiaries and Affiliates		-		-		-		-
Total Common Stock	\$ 12,076	,828	\$	-	\$	-	\$	12,076,828
Derivative assets								
Interest rate contracts	\$	-	\$	-	\$	-	\$	-
Foreign exchange contracts		-		-		-		-
Credit contracts		-		-		-		-
Commodity futures contracts		-		-		-		-
Commodity forward contracts		-		-		-		-
Total Derivatives	\$	-	\$	-	\$	-	\$	-
Total assets at fair value	\$30,520	,810 \$	16,108	3,045	\$	-	\$	46,628,855

21. Other Items: No change

22. Events Subsequent:

Type I - Recognized Subsequent Events: The Company has no Type I - Recognized subsequent Events.

Type II - Nonrecognized Subsequent Events: The Company has no Type II - Nonrecognized subsequent Events.

- 23. Reinsurance: No change
- 24. Retrospectively Rated Contracts & Contracts Subject to Redetermination: Not applicable

25. Change in Incurred Claims and Claim Adjustment Expenses:

Reserves as of December 31, 2014 were \$23,980,563. As of September 30, 2015 \$20,239,117 has been paid for incurred claims and claims adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now (\$50,269) as a result of re-estimation of unpaid claims and claims adjustment expenses. Therefore, there has been a \$3,791,715 favorable prior-year development since December 31, 2014 to September 30, 2015. The decrease is generally a result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased, as additional information becomes known regarding individual claims.

26. Intercompany Pooling arrangements: Not Applicable

27. Structured Settlements: Not applicable

28. Health Care Receivables: No change

29. Participating Policies: Not applicable

30. Premium Deficiency Reserves:

1. Liability carried for premium deficiency reserves

\$1,369,000 September 30, 2015

2. Date of the most recent evaluation of this liability

3. Was anticipated investment income utilized in the calculation?

31. Anticipated Salvage and Subrogation: No change

GENERAL INTERROGATORIES PART 1 - COMMON INTERROGATORIES

			GENERAL			
1.1	Did the reporting entity experience any material Model Act?	transactions requiring the filing of Disclosure of I	Material Transactions with the State	of Domicile, as requi	red by the	Yes () No (X)
1.2	If yes, has the report been filed with the domicili	ary state?				Yes () No ()
2.1	Has any change been made during the year of the entity?	nis statement in the charter, by-laws, articles of	incorporation, or deed of settlement	t of the reporting		Yes (X) No ()
2.2	If yes, date of change:					02/11/2015
3.1	Is the reporting entity a member of an Insurance is an insurer?	Holding Company System consisting of two or r	more affiliated persons, one or more	of which		Yes (X) No ()
	If yes, complete Schedule Y, Parts 1 and 1A.					
3.2	Have there been any substantial changes in the	organizational chart since the prior quarter end?)			Yes () No (X)
3.3	If the response to 3.2 is yes, provide a brief des	cription of those changes.				
4.1	Has the reporting entity been a party to a merge	r or consolidation during the period covered by t	his statement?			Yes () No (X)
4.2	If the response to 4.1 is yes, provide the name to exist as a result of the merger or consolidation		micile (use two letter state abbreviat	tion) for any entity th	at has ceased	
	1 Name of Ent	ity	2 NAIC Company Code		3 State of Do	micile
5.	If the reporting entity is subject to a managemen have there been any significant changes regardi	it agreement, including third-party administratoring the terms of the agreement or principals invo	(s), managing general agent(s), at lved?	ttorney-in-fact, or sin	ıılar agreement,	Yes () No () N/A (X)
6.1	State as of what date the latest financial examin	ation of the reporting entity was made or is being	g made.			12/31/2014
6.2	State the as of date that the latest financial exar This date should be the date of the examined ba	nination report became available from either the lance sheet and not the date the report was com	state of domicile or the reporting entropleted or released.	tity.		12/31/2011
6.3	State as of what date the latest financial examin This is the release date or completion date of the	ation report became available to other states or e examination report and not the date of the exa	the public from either the state of do mination (balance sheet date).	micile or the reportin	g entity.	12/07/2012
6.4	By what department or departments?					
6.5	Have all financial statement adjustments within th with Departments?	e latest financial examination report been accou	inted for in a subsequent financial sta	atement filed		Yes () No () N/A (X)
6.6	Have all of the recommendations within the latest	financial examination report been complied with	?			Yes () No () N/A (X)
7.1	Has this reporting entity had any Certificates of A governmental entity during the reporting period?	uthority, licenses or registrations (including corp	porate registration, if applicable) sus	spended or revoked b	y any	Yes () No (X)
7.2	If yes, give full information					
8.1	Is the company a subsidiary of a bank holding cor	nnany regulated by the Federal Reserve Roard?				Yes () No (X)
	If response to 8.1 is yes, please identify the nam	. , ,				103 () 110 (x)
		· · · · · · · · · · · · · · · · · · ·				
8.3	Is the company affiliated with one or more banks,	thrifts or securities firms?				Yes () No (X)
8.4	If response to 8.3 is yes, please provide below th [[i.e. the Federal Reserve Board (FRB), the Off Commission (SEC)] and identify the affiliate's pri	ice of the Comptroller of the Currency (OCC), t	n office) of any affiliates regulated by he Federal Deposit Insurance Corpo	y a federal regulatory ration (FDIC) and th	services agency e Securities Exchar	nge
	1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC
9.1	Are the senior officers (principal executive office similar functions) of the reporting entity subject (a) Honest and ethical conduct, including the (b) Full, fair, accurate, timely and understand (c) Compliance with applicable governmental	er, principal financial officer, principal accounting to a code of ethics, which includes the following ethical handling of actual or apparent conflicts of dable disclosure in the periodic reports required	f interest between personal and profe to be filed by the reporting entity;	rforming essional relationships		Yes (X) No ()
9.11	If the response to 9.1 is No, please explain:					
9.2	Has the code of ethics for senior managers beer	n amended?				Yes () No (X)
9.21	If the response to 9.2 is Yes, provide information	n related to amendment(s).				
0 0						V () N. (90
9.3	Have any provisions of the code of ethics been v	, ,				Yes () No (X)
9.31	If the response to 9.3 is Yes, provide the nature	or any waiver(s).				

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

					—		
				FINAN	CIAL		
10.1	Does the reporting entity report any amo	unts due from parent, subs	sidiaries or affiliates o	on Page 2 of this stat	ement?		Yes () No (X)
10.2	If yes, indicate the amounts receivable fi	rom parent included in the F	Page 2 amount:				\$
				INVEST	MENT		
11.1	Were any of the stocks, bonds, or other (Exclude securities under securities lend	assets of the reporting ent	ity loaned, placed un	der option agreeme	nt, or otherwise m	ade available for use by another perso	n? Yes () No (X)
11.2	If yes, give full and complete information	,					165 () NO (A)
12.	Amount of real estate and mortgages hel						\$
13.	Amount of real estate and mortgages he	ld in short-term investments	s:				\$
14.1	Does the reporting entity have any investi	tments in parent, subsidiar	ies and affiliates?				Yes () No (X)
14.2	If yes, please complete the following:						0
						1 Prior Year-End Book/ Adjusted Carrying Value	2 Current Quarter Book/ Adjusted Carrying Value
	14.21 Bonds					\$ \$	\$ \$
	14.23 Common Stock. 14.24 Short-Term Investments					\$	\$ \$
	14.25 Mortgage Loans or Real Estat 14.26 All Other	e				\$	\$
	14.27 Total Investment in Parent, So 14.28 Total Investment in Parent inc	ubsidiaries and Affiliates (S	Subtotal Line 14.21 to	Line 14.26)		\$	\$ \$
15 1	Has the reporting entity entered into any					Ψ	Yes () No (X)
	If yes, has a comprehensive description				2		
13.2	If no, attach a description with this state		en made avaliable to	the domicilary state	:		Yes () No ()
40	•		d af the fallendar as	-ft -t-t	data.		
16.	For the reporting entity's security lending 16.1 Total fair value of reinvested colla	. •	•		uale:		\$
	16.2 Total book adusted/carrying value	·			nd 2		\$
	16.3 Total payable for securities lendin		·	cudic DE, i alto i a	IU 2		\$
17.	Excluding items in Schedule E - Part 3 - safety deposit boxes, were all stocks, but or trust company in accordance with Sec of the NAIC Financial Condition Examine	Special Deposits, real esta onds and other securities, tion 1, III - General Examin rs Handbook?	te, mortgage loans a owned throughout the nation Considerations	e current year held p , F. Outsourcing of	ursuant to a custo Critical Functions	dial agreement with a qualified bank , Custodial or Safekeeping Agreements	Yes (X) No ()
17.1	For all agreements that comply with the I	requirements of the NAIC F	Inancial Condition Ex	aminers Handbook,	complete the folio	wing:	
	1 Name of Custodia	n(s)				2 Custodian Address	
TD Bank.	N.A		TDWealth	. Institutional Trust	1006 Astoria Boll	evard, Cherry Hill, NJ 08034	
	For all agreements that do not comply wi						
	1 Name(s)		2 Location(s)			3 Complete Expl	anation(s)
47.0	Have there been any changes, including	nome changes, in the qual		17 1 during the our	ront quarter?		Yes (X) No ()
	If yes, give full and complete information	•	todian(s) identined in	i ii . i duillig tile cui	rent quarter :		Tes (A) NO ()
	1	2		3		4	
	Old Custodian	New Custo	odian	Date of Change		Reason	
17.5	Identify all investment advisors, broker/oinvestments on behalf of the reporting er		on behalf of broker/	dealers that have ac	cess to the investi	ment accounts, handle securities and h	nave authority to make
	1 Central Registration			2		:	3
	Depository		N	lame(s)		Add	ress
		T	D Private Client Weal D Asset Mgt is the m	kth is the Broker/De gr acting on behalf E	aler 444 Ma rok TD Car	dison Avenue, New York, NY 10022 nada Trust Tower, 161 Bay Street, 35tl	e, Portland, ME 04101 Floor, Toronto, Ontario M5K2T2
	Have all the filing requirements of the Purp f no, list exceptions:	ooses and Procedures Man	ual of the NAIC Secu	rities Valuation Offic	e been followed?		Yes (X) No ()

STATEMENT AS OF SEPTEMBER 30, 2015 OF THE Martin's Point Generations, LLC

GENERAL INTERROGATORIES PART 2 - HEALTH INTERROGATORIES

1.	Operatir	ng Percentages:	
	1.1	A&H loss percent	99.0 %
	1.2	A&H cost containment percent	0.9 %
	1.3	A&H expense percent excluding cost containment expenses	8.7 %
2.1	Do you	act as a custodian for health savings accounts?	Yes () No (X)
2.2	If yes, p	please provide the amount of custodial funds held as of the reporting date.	\$
2.3	Do you	act as an administrator for health savings accounts?	Yes () No (X)
2.4	If yes, p	please provide the balance of the funds administered as of the reporting date.	\$

Page 13 Schedule S - Ceded Reinsurance NONE

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories

1.										
1.	States, Etc.	Active Status	2 Accident and Health Premiums	3 Medicare Title XVIII	4 Medicaid Title XIX	5 Federal Employees Health Benefits Program Premiums	6 Life and Annuity Premiums and Other Considerations	7 Property/ Casualty Premiums	8 Total Column 2 Through Column 7	9 Deposit-Type Contracts
	Alabama AL Alaska AK	N								
	Arizona AZ	N								
4.	Arkansas AR	N								
5.	California	N								
	Colorado	N								
	Connecticut	N N								
9.	District of Columbia	N N								
	Florida	N								
11.	Georgia GA	N								
12.	Hawaii HI	N								
13.	Idaho ID	N								
14. 15.	Illinois IL Indiana IN	N N								
16.	lowa IA	N								
	Kansas KS	N								
18.	Kentucky KY	N								
19.	Louisiana LA	N								
	MaineME	L N		, ,					. 196,962,918	
21. 22.	Maryland MD Massachusetts MA	N								
	Michigan MI	N								
24.	Minnesota MN	N								
25.	Mississippi MS	N								
26.	Missouri MO	N								
27.	Montana MT	N								
28. 29.	Nebraska NE Nevada NV	N N								
30.	Nevada NV New Hampshire NH	L		7,367,050					7,367,050	
31.	New Jersey	N		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					7,007,000	
	New Mexico	N								
33.	New York NY	N								
34.	North Carolina	N								
35.	North Dakota	N N								
	Ohio OH Oklahoma OK	N N								
	Oregon OR	N								
	Pennsylvania PA	N								
40.	Rhode Island RI	N								
41.	South Carolina	N								
42.	South Dakota SD	N								
43. 44.	Tennessee TN Texas TX	N N								
	Utah UT	N								
	Vermont VT	N								
	Virginia VA	N								
	Washington. WA	N		1						
	West Virginia WV	N								
	Wisconsin WI Wyoming WY	N N								
	American Samoa	N								
	Guam. GU	N								
54.	Puerto RicoPR	N								
55.	U.S. Virgin Islands VI	N								
	Northern Mariana Islands MP	N								
	Canada CAN									
	Aggregate Other Alien OT Subtotal	XXX		204,329,968					. 204,329,968	
	Reporting entity contributions for			201,020,000		l			201,020,000	
	Employee Benefit Plans	XXX								
61.	Total (Direct Business)	(a) 2		. 204,329,968					. 204,329,968	
ETAIL 8001.	LS OF WRITE-INS									
8002.										
8003.										
8998.	Summary of remaining write-ins for Line 58 from overflow page	ge								
J999.	Total (Line 58001 through Line 58003 plus Line 58998)									
	(Line 58 above)									

Active Status Codes (Column 1):

(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG
(R) Registered - Non-domiciled RRGs
(Q) Qualified - Qualified or Accredited Reinsurer
(E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state
(N) None of the above - Not allowed to write business in the state

(a) Insert the number of "L" responses except for Canada and Other Alien.

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 - ORGANIZATIONAL CHART

Martin's Point Health Care, Inc.
FEIN #01-0353275
State of Maine Incorporated
04/13/1971

Martin's Point Generations, LLC Wholly Owned Subsidiary

FEIN #20-4505084

NAIC Code #12545

State of Maine Incorporated 01/10/2006

Martin's Point Community Health Administrators, LLC

Wholly Owned Subsidiary

FEIN #80-0647782

State of Maine Incorporated 09/29/2010 Martin's Point Community Health Plans, Inc.

Wholly Owned Subsidiary

FEIN #80-0647785

State of Maine Incorporated 09/29/2010 Martin's Point Generations Advantage, Inc.

Wholly Owned Subsidiary

FEIN # 47-4682941

State of Maine Incorporated

7/31/2015

15

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12 Type of Control (Ownership,	13	14	15
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent , Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
			01-0353275				Martin's Point Health Care, Inc.	MF	LIDP	Martin's Point Health Care, Inc.	Board of Directors	100 000	Martin's Point Health Care, Inc.	
			80-0647782				Martin's Point Community Health Admin., LLC	ME	DS	Martin's Point Health Care, Inc.	Board of Directors	100.000	Martin's Point Health Care, Inc	
		12545	80-0647785 20-4505084				Martin's Point Generations . LLC	ME	DS	Martin's Point Health Care, Inc.	Board of Directors Board of Directors		Martin's Point Health Care, Inc	
			47-4682941				Martin's Point Generations Advantage, Inc.	ME	DS	Martin's Point Health Care, Inc.	Board of Directors	100.000	Martin's Point Health Care, Inc	

Asterisk	Explanation

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATIONS and provide an explanation following the interrogatory questions.

RESPONSE

1. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?

NO

EXPLANATIONS:

BAR CODE:

Document Identifier 365:



SCHEDULE A - VERIFICATION

Real Estate

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 2. Cost of acquired: 2.1 Actual cost at time of acquisition 2.2 Additional investment made after ac 3. Current year change in encumbrances 4. Total gain (loss) on disposals 5. Deduct amounts received on disposals 6. Total foreign exchange change in book/ac 7. Deduct current year's other-than-temporal 8. Deduct current year's depreciation 9. Book/adjusted carrying value at end of cu		

SCHEDULE B - VERIFICATION

Mortgage Loans

		1	2 Prior Year Ended
		Year To Date	December 31
_	Deskursky forwards disconstruction of such disc		
1. 2.	Book value/recorded investment excluding		
۷.	Cost of acquired: 2.1. Actual cost at time of acquisition . 2.2. Additional investment made after a		
3	Capitalized deferred interest and other		
Δ.	Accrual of discount		
٦. 5	Unrealized valuation increase (decrease)		
6	Total gain (loss) on disposals		
7	Deduct amounts received on disposals		
8.	Deduct amortization of premium and mort		
9.	Total foreign exchange change in book value/recorded investment excluding accrued interest		
10.	Deduct current year's other-than-temporary impairment recognized		
11.	Book value/recorded investment excluding accrued interest at end of current period (Line 1 plus Line 2 plus		
	Line 3 plus Line 4 plus Line 5 plus Line 6 minus Line 7 minus Line 8 plus Line 9 minus Line 10)		
12.	Total Valuation Allowance		
13.	Subtotal (Line 11 plus Line 12)		
14.	Deduct total nonadmitted amounts		
15.	Statement value at end of current period (Line 13 minus Line 14)		

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

		1 Year To Date	2 Prior Year Ended December 31
1. 2.	Book/adjusted carrying value, December Cost of acquired:		
	2.1. Actual cost at time of acquisition . 2.2. Additional investment made after a		
2			
J.	Capitalized deferred interest and other		
4.	Accrual of discount		
5.	Unrealized valuation increase (decrease)		
6.	Total gain (loss) on disposals		
7.	Deduct amounts received on disposals		
8.	Deduct amortization of premium and depreciation		
9.	Total foreign exchange change in book/adjusted carrying value		
10.	Deduct current year's other-than-temporary impairment recognized		
11.	Book/adjusted carrying value at end of current period (Line 1 plus Line 2 plus Line 3 plus Line 4 plus		
	Line 5 plus Line 6 minus Line 7 minus Line 8 plus Line 9 minus Line 10)		
12	Deduct total nonadmitted amounts		
12.			
13.	Statement value at end of current period (Line 11 minus Line 12)		

SCHEDULE D - VERIFICATION

Bonds and Stocks

		1 Year To Date	2 Prior Year Ended December 31
1. 2. 3. 4. 5. 6. 7.	Book/adjusted carrying value of bonds and stocks, December 31 of prior year Cost of bonds and stocks acquired Accrual of discount Unrealized valuation increase (decrease) Total gain (loss) on disposals Deduct consideration for bonds and stocks disposed of Deduct amortization of premium Total foreign exchange change in book/adjusted carrying value Deduct current year's other-than-temporary impairment recognized	27,334,799 5,538 (1,178,831) (13,211) 9,028,406 206,002	32,491,127 73 (332,199) (536) 2,367,225 76,273
10.	Book/adjusted carrying value at end of current period (Line 1 plus Line 2 plus Line 3 plus Line 4 plus Line 5 minus Line 6 minus Line 7 plus Line 8 minus Line 9) Deduct total nonadmitted amounts	46,628,854	29,714,967
12.	Statement value at end of current period (Line 10 minus Line 11)	46,628,854	29,714,967

SI02

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity

During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

	1	2	3	4	5	6	7	8
NAIC Designation	Book/Adjusted Carrying Value Beginning of Current Quarter	Acquisitions During Current Quarter	Dispositions During Current Quarter	Non-Trading Activity During Current Quarter	Book/Adjusted Carrying Value End of First Quarter	Book/Adjusted Carrying Value End of Second Quarter	Book/Adjusted Carrying Value End of Third Quarter	Book/Adjuste Carrying Valu December 3 Prior Year
ONDS								
. NAIC 1 (a)		22,736,392		(69,728)	21,420,669	28,148,617	35,903,846	21,412,
NAIC 3 (a) NAIC 4 (a) NAIC 5 (a) NAIC 6 (a)						1		
. Total Bonds	28,148,617	22,736,392	14,911,435	(69,728)	21,420,669	28,148,617	35,903,846	21,412
REFERRED STOCK								
NAIC 1 NAIC 2 NAIC 3 NAIC 4 NAIC 5 NAIC 5								
Total Preferred Stock								
Total Bonds and Preferred Stock.	28,148,617	22,736,392	14,911,435	(69,728)	21,420,669	28,148,617	35,903,846	21,412

SCHEDULE DA - PART 1

Short-Term Investments

	1	2	3	4	5
	Book/Adjusted Carrying Value	Par Value	Actual Cost	Interest Collected Year To Date	Paid for Accrued Interest Year To Date
9199999	1,241,774	XXX	1,241,774	19	

SCHEDULE DA - VERIFICATION

Short-Term Investments

	1	2
	Year To Date	Prior Year Ended December 31
Book / adjusted carrying value, December 31 of prior year	780,311	611,144
2. Cost of short-term investments acquired	23,921,227	24,808,261
3. Accrual of discount	106	379
4. Unrealized valuation increase (decrease)		
5. Total gain (loss) on disposals	(4,913)	(439)
6. Deduct consideration received on disposals	23,445,829	24,636,882
7. Deduct amortization of premium		
8. Total foreign exchange change in book/adjusted carrying value		
Deduct current year's other-than-temporary impairment recognized		
10. Book/adjusted carrying value at end of current period (Line 1 + Line 2 + Line 3 + Line 4 + Line 5 - Line 6 - Line 7 + Line 8 - Line 9)		780,311
11. Deduct total nonadmitted amounts		
12. Statement value at end of current period (Line 10 minus Line 11)	1,241,774	780,311

SCHEDULE DB - PART A - VERIFICATION

Options, Caps, Floors, Collars, Swaps and Forwards

4	Deals (Adicated Coming Value December 24 minutes (Line O minutes)	
	Book/Adjusted Carrying Value, December 31, prior year (Line 9, prior year)	
	Cost Paid / (Consideration Received) on additions	
	Unrealized Valuation increase / (decrease) Total gain (loss) on termination recognized	
	Considerations received/ (paid) on terminations Amortization	
	Adjustment to the Book/Adjusted Carrying Valu	
	Total foreign exchange change in Book/Adjustes cours may value	
	Book/Adjusted Carrying Value at End of Current Period (Line 1 plus Line 2 plus Line 3 plus Line 4 minus	
10	Line 5 plus Line 6 plus Line 7 plus Line 8)	
	Deduct nonadmitted assets Statement value at end of current period (Line 9 minus Line 10)	
	SCHEDULE DB - PART B - VERIFICAT	ΓΙΟΝ
	Futures Contracts	
1.	Book/Adjusted carrying value, December 31 of prior year (Line 6, prior year)	
2.	Cumulative cash change (Section 1, Broker Name/Net Cash Deposits Footnote - Cumulative Cash Change column)	
3.1	Add:	
	Change in variation margin on open contracts - Highly Effective Hedges	
	3.11 Section 1, Column 15, current year to date minus	
	3.12 Section 1, Column 15, prior year	
	Change in variation margin on open contracts - All Other	
	3.13 Section 1, Column 18, current year to date minus	
	3.14 Section 1, Column 18, prior year	
3.2	2 Add:	
	Change in adjustment to basis of hedged i	
	3.21 Section 1, Column 17, current year to c	
	3.22 Section 1, Column 17, prior year	
	Change in amount recognized	
	3.23 Section 1, Column 19, current year to date minus	
	3.24 Section 1, Column 19, prior year	
3.3	3 Subtotal (Line 3.1 minus Line 3.2)	
4.1		
4.2	Less:	
	4.21 Amount used to adjust basis of hedged item	
	4.22 Amount recognized	
	3 Subtotal (Line 4.1 minus Line 4.2)	
5.	Dispositions gains (losses) on contracts terminated in prior year:	
	5.1 Total gain (loss) recognized for terminations in prior year	
c	5.2 Total gain (loss) adjusted into the hedged item(s) for terminations in prior year	
6.	Book/Adjusted carrying value at end of current period (Line 1 plus Line 2 plus Line 3.3 minus Line 4.3 minus Line 5.1 minus Line 5.2) Deduct total nonadmitted amounts	
7. o		
8.	Statement value at end of current period (Line 6 minus Line 7)	

Page SI05
Schedule DB, Pt. C, Section 1, Replicated (Synthetic Assets) Open NONE

Page SI06
Sch DB, Pt C, Sn 2, Replication (Syn Assets) Transactions Open NONE

SCHEDULE DB - VERIFICATION

Verification of Book/Adjusted Carrying Value, Fair Value and Potential Exposure of all Open Derivative Contracts

		Book/Adjusted Carrying Value Check
1.	Part A, Section 1, Column 14	
2.	Part B, Section 1, Column 15 plus Part B, Section 1	
3.	Total (Line 1 plus Line 2)	
4.	Part D. Section 1, Column 5	
5.	Part D, Section 1, Column 6	
6.	Total (Line 3 minus Line 4 minus Line 5)	
		Fair Value Check
7.	Part A, Section 1, Column 16	
8.	Part B, Section 1, Column 13	
9.	Total (Line 7 plus Line 8)	
10.	Part D, Section 1, Column 8	
11.	Part D, Section 1, Column 9	
12.	Total (Line 9 minus Line 10 minus Line 11)	
		Potential Exposure Check
13.	Part A, Section 1, Column 21	
14.	Part B, Section 1, Column 20	
15.	Part D, Section 1, Column 11	
16.	Total (Line 13 plus Line 14 minus Line 15)	

SCHEDULE E - VERIFICATION

(Cash Equivalents)

	1	2
	Year To Date	Prior Year Ended December 31
Book/adjusted carrying value, December 31 of prior year		
Cost of cash equivalents acquired		
3. Accrual of discount		
Unrealized valuation incre	l	· · · · · · · · · · · · · · · · · · ·
5. Total gain (loss) on disp		
Deduct consideration rec Deduct amortization of process.		
7. Deduct amortization of pr		
8. Total foreign exchange cl		
Deduct current year's other-than-temporary impairment recognized	 	
10. Book/adjusted carrying value at end of current period (Line 1 + Line 2 + Line 3 + Line 4 + Line 5 - Line 6 - Line 7 + Line 8 - Line 9)		
11. Deduct total nonadmitted amounts		
12. Statement value at end of current period (Line 10 minus Line 11)		

Page E01
Sch. A, Pt. 2, Real Estate Acquired
NONE

Sch. A, Pt. 3, Real Estate Disposed **NONE**

Page E02
Schedule B, Part 2, Mortgage Loans Acquired NONE

Schedule B , Part 3 , Mortgage Loans Disposed **NONE**

1	2			5	6	7	8	9	10	11	12	13
		Locati	on						Additional		Commitment	
CUSIP		Location 3 4 City State		Name of Vendor	NAIC	Date Originally	Type	Actual Cost at Time of	Investment Made After	Amount	for Additional	Percentage of
CUSIP Identification	Name or Description	City State		or General Partner	Designation	Acquired	Strategy	Acquisition	Acquisition	Encumbrances	Investment	Ownership

NONE

SCHEDULE BA - PART 3

Showing Other Long-Term Invested Assets DISPOSED, Transferred or Repaid During the Current Quarter

1	2			5	6	7	8 Change in Book/Adjusted Carrying Value						15	16	17	18	19	20	
		Locat	ion				Book/Adjusted	9	10 Current Year's	11 Current Vear's	12	13	14 Total	Book/Adjusted					
		3	4	Name of Purchaser	Date		Carrying Value Less	Unrealized Valuation	(Depreciation)	Other-Than- Temporary	Capitalized Deferred	Total Change in	Foreign Exchange	Carrying Value Less		Foreign Exchange	Realized	Total	
CUSIP Identification	Name or Description	City	State		Originally Acquired	Disposal Date	Encumbrances, Prior Year	Increase (Decrease)	(Amortization) / Accretion	Impairment Recognized	Interest and Other	B./A.C.V. (9+10-11+12)	Change in	Encumbrances	Consideration	Gain (Loss) on Disposal	Gain (Loss) on Disposal	Gain (Loss) on Disposal	Investment Income

NONE

SCHEDULE D - PART 3

Show All Long-Term Bonds and Stock Acquired by the Company During the Current Quarter

		1	1	1					Γ	
1	2	3	4		5	6	7	8	9	10
									Paid for Accrued	NAIC Designation
CUSIP			Date			Number of Shares			Interest and	or Market
Identification	Description	Foreign	Acquired		Name of Vendor	of Stock	Actual Cost	Par Value	Dividends	Indicator (a)
Bonds - U.S. Go	vernments	•	•	•			<u>.</u>		•	
912828-NA-4	US TREASURY N/B			Not Provided			1,390,121	1,335,000.00	12,810	1
912828-PA-2	US TREASURY N/B			Not Provided				1,780,000.00	12,269	1
912828-RM-4	US TREASURY N/B		08/18/2015	Not Provided				1,175,000.00	3,608	1
912828-UZ-1	US TREASURY N/B		. 09/16/2015	Not Provided			1,264,278 .	1,277,000.00		1
0599999 - Subtota	l - Bonds - U.S. Governments						5,656,735	5,567,000.00	31,503	
Bonds - All Other	Governments									
	ONTARIO (PROVINCE OF)							230,000.00	1,533	1FE
1099999 - Subtota	Il - Bonds - All Other Governments							230,000.00		
Bonds - U.S. Sne	ecial Revenue and Special Assessment and all Non-Guaranteed Obligations of Agencies and Authoriti	ies of Governme	ents and Thei	Political Subdivisions						
3135G0-TG-8	FANNIE MAE		. 09/16/2015	Not Provided			1.441.210	1.445.000.00		1
3199999 - Subtota	FANNIE MAE II - Bonds - U.S. Special Revenue and Special Assessment and all Non-Guaranteed Obligations of A	gencies and Aut	horities of Go	vernments and Their Po	litical Subdivisions		1.441.210	1,445,000.00		
		J					, , .	, .,	, ,	
Bonds - Industrial 037833-AJ-9	and Miscellaneous (Unaffiliated) APPLE INC		00/10/2015	Not Provided			160 057	165,000.00	40E	100
055451-AP-3	BHP BILLITON FIN USA LTD	D	. 00/10/2013	Not Provided				85,000.00		1FE
06050T-LR-1	BANK OF AMERICA NA	N	00/10/2013					85,000.00		
07330N-AC-9	BRANCH BANKING & TRUST						246 374	245,000.00		
191216-AU-4	COCA-COLA CO/THE			Not Provided			161.789	160,000.00		1FE
191216-BA-7	COCA-COLA CO/THE						715.419	719,000.00		
36962G-6K-5	GENERAL ELEC CAP CORP			Not Provided			235.900	235,000.00	950	
38141G-RC-0	GOLDMAN SACHS GROUP INC		08/18/2015	Not Provided				150,000.00	287	1FE
437076-BB-7	HOME DEPOT INC			Not Provided			659,069	646,000.00	444	
46623E-JY-6	JPMORGAN CHASE & CO							255,000.00		1FE
69353R-EJ-3	PNC BANK NA							160,000.00		
78008S-VD-5	ROYAL BANK OF CANADA						249,565 .	250,000.00		
90331H-MC-4	US BANK NA CINCINNATI							185,000.00		
931142-CJ-0 94974B-EZ-9	WAL-MART STORES INC WELLS FARGO & COMPANY		. 09/16/2015	Not Provided			813,2/8 .	735,000.00		
	WELLS FARGO & COMPANY Il - Bonds - Industrial and Miscellaneous (Unaffiliated)		. 00/10/2010	Not Provided			4.492.718	320,000.00	1,540	1FE
Jossss - Subiola	ii - Donus - ilidustrial and ivilscellaneous (Orlanillateu)						4,432,710 .	4,353,000.00		
8399997 - Subtota	ıl - Bonds - Part 3						11,822,811 .	11,637,000.00	50,906	
8399999 - Subtota	ıl - Bonds						11,822,811	11,637,000.00	50,906	
Common Stocks -										
	VANGUARD TOT INT ST IDX-ADM		09/24/2015	Unknown		45,853.870	1,217,482			
922042-84-1	VANGUARD EM MKT STK IND-ADM		09/24/2015	Unknown		20,015.434				
	VANGUARD TOT STK MKT-INST									
9299999 - Subtota	ıl - Common Stocks - Mutual Funds						4,074,307			
Common Stocks -	Money Market Mutual Funds									
90262H-16-3	UBS SELECT PRIME CAPITAL		07/01/2015	Adjustment		810.000				L
9399999 - Subtota	al - Common Stocks - Money Market Mutual Funds									
9799997 - Subtota	ıl - Common Stocks - Part 3						4,075,117			
0700000 0 1111	1. O Ot . I .						4 075 447			
	nl - Common Stocks on stock bearing the NAIC market indicator "U" provide: the number of such issues						4,0/5,117			
(a) I of all confille	on stook boaring the NATO market indicator of provide, the number of such issues									

SCHEDULE D - PART 3

Show All Long-Term Bonds and Stock Acquired by the Company During the Current Quarter

		1			_				
1	2	3	4	5	6	7	8	9	10
CUSIP Identification	Description	Foreign	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends	NAIC Designation or Market Indicator (a)
9899999 - Subtotal	- Preferred and Common Stocks					4,075,117			
9999999 - TOTALS						15.897.927		50.906	

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of by the Company During the Current Quarter

1	2	3	4	5	6	7	8	9	10		Change In I	Book/Adjusted Ca	rrying Value		16	17	18	19	20	21	22 NAIC
CUSIP Identifi- cation	Description	Foreigr	Disposal Date		Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amort- ization) / Accretion	13 Current Year's Other- Than-Temporary Impairment Recognized	Total Change in B./A. C.V. (11+12-13)	Total Foreign Exchange Change in B./A.C.V.	Book/Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/ Stock Dividends Received During Year	Stated Contractua Maturity Date	Designa- tion or Market
Bonds - U.S. 912828-QJ-2 U 0599999 - Subi	US TREASURY N/B		. 08/01/2015	VARIOUS		694,592 694,592	. 686,917.54 . 686,917.54	704,493 704,493	701,397 701,397		(7,182) (7,182)		(7, 182) (7, 182)		694,215 694,215		377 377	377 377	13,367 13,367	02/29/2016	i 1
3135G0-BA-0 F 3135G0-TG-8 F 3199999 - Subi	FANNIE MAE FANNIE MAE total - Bonds - U.S. Special Revenue :	and Special A	. 09/16/2015 . 09/16/2015 Assessment a	ed Obligations of Agencies and Authorities of (Not Provided Not Provided nd All Non-Guaranteed Obligations of Agencie:	es and	601,557 378,913	. 595,000.00 . 380,000.00	378,911			138		138		379,049		(136)	(136)	1,414	02/08/2018	3 1
Bonds - Indust 191216-AU-4 (20030N-AL-5 (trial and Miscellaneous (Unaffiliated) COCA-COLA CO/THE COMCAST CORP		. 09/16/2015 . 08/01/2015	Not Provided Adjustment		722,336 (14,977)	. 715,000.00	728,251	438 , 177		(4,276)		(4,276)		722,762		(426) (14, 977)	(426)	11,020	09/01/2016 03/15/2016	3 1FE
931142-DC-4 \ 3899999 - Subt	total - Bonds - Industrial and Miscelland	eous (Unaffil	09/16/2015 iated)	Not Provided		430,653 1,531,297	. 425,000.00 .1,525,000.00		1,281,932		(7,000)		(7,000)		430,515 1,546,424		(15, 127)	(15, 127)	11,107 59,048	04/15/2016	3 1FE
8399999 - Subt	total - Bonds										,		, ,				, ,	, ,			
90262H-16-3 U 9399999 - Subi	total - Common Stocks - Money Marke	t Mutual Fun	ds	Adjustment		810		810	112						810						
9799999 - Subt	total - Common Stocks					810		810	112						810						
9999999 - Subi																					

E

SCHEDULE DB - PART A - SECTION 1

Showing all Options, Caps, Floors, Collars, Swaps and Forwards Open as of Current Statement Date

1 2 3 4 5 6 7 8 9 10 11 12	13 14 15	16 17	18 19	20 21	22 23
Exchange, Counterparty					
or					Hedge
Cumulative Current			Total		Credit Effectiveness
Type(s) Clearinghouse Date of Prior Year(s) Year Initial		Unrealized	Foreign	Adujustment	Quality at Inception
Description of Item (s) of Maturity Number Strike Price, Initial Cost Cost of		Valuation	Exchange Current Year's		of and at
Hedged, Used for Income Schedule/Exhibit Risk(s) Trade or of Notional Rate or Index of Premium Premium	Current Book/Adjusted	Increase/	Change in (Amortization) /	Value of Potenti	ial Reference Quarter-end
Description Generation or Replicated Identifier (a) Name LEI Date Expiration Contracts Amount Received (Paid) (Received) Paid (Received) Paid	Year Income Carrying Value Code Fair	air Value (Decrease)	B./A.C.V. Accretion	Hedged Item Exposu	re Entity (b)

NONE

Code Description of Hedged Risk(s)

A9999 - Description of Hedged Risk(s)

NONE

(b)

Code Financial or Economic Impact of the Hedge at the End of the Reporting Period

B9999 - Financial or Economic Impact of the Hedge

NONE

SCHEDULE DB - PART B - SECTION 1

Future Contracts Open as of the Current Statement Date

1	2	3	4	5	6	7	8	Evo	9 hanga	10	11	12	13	14	H	ighly Effective Hed	ges	18	19	20	21	22
Ticker Symbol	Number of Contracts	Notional Amount	Description	Description of Item(s) Hedged, Used for Income Generation or Replicated	Schedule/ Exhibit Identifier	Type(s) of Risk(s) (a)	Date of Maturity or Expiration	Name	Legal Entity Identifier (LEI)	Trade Date	Transaction Price	Reporting Date Price	Fair Value	Book/ Adjusted Carrying Value	15 Cumulative Variation Margin	16 Deferred Variation Margin	17 Change in Variation Margin Gain (Loss) Used to Adjust Basis of Hedged Item	Cumulative Variation Margin for All Other Hedges			Hedge Effectiveness at Inception and at Quarter-end (b)	Value of One (1) Point

NONE

Broker Name	Beginning Cash Balance	Cumulative Cash Change	Ending Cash Balance	
-------------	------------------------	------------------------	---------------------	--

NONE

(a)

Code Description of Hedged Risk(s)

A9999 - Description of Hedged Risk(s)

NONE

(b)

Code Financial or Economic Impact of the Hedge at the End of the Reporting Period

B9999 - Financial or Economic Impact of the Hedge at the End of the Reporting Period

NONE

E07

Page E08 Schedule DB, Part D, Section 1 NONE

Page E09

Schedule DB, Part D, Section 2, By Reporting Entity **NONE**

Schedule DB, Part D, Section 2, To Reporting Entity **NONE**

Page E10 Schedule DL, Part 1 NONE

Page E11 Schedule DL, Part 2 NONE

STATEMENT AS OF SEPTEMBER 30, 2015 OF THE Martin's Point Generations, LLC

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1 Depository		2	3 Rate of	Amount of Interest	5 Amount of Interest Accrued at Current	Book Balance at End of Each Month During Current Quarter			
						6	7	8	
Name	Location and Supplemental Information	Code	Interest	Received During Current Quarter	Statement Date	First Month	Second Month	Third Month	
Open Depositories TD Bank	Portland, ME		0.001	1,839		42,456,611	9,358,806	5,344,942 (342,326)	
1019999 - Deposits in									
0199999 - TOTAL - Open Depositories .				1,839		43,359,317	9,358,127	5,002,616	
0399999 - TOTAL Cash on Deposit				1,839		43,359,317	9,358,127	5,002,616	
0599999 - TOTALS				1.839		43.359.317	9.358.127	5.002.616	

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1	2	3	4	5	6	7	8
Description	Code	Date Acquired	Rate of Interest	Maturity Date	Book/Adjusted Carrying Value	Amount of Interest Due and Accrued	Amount Received During Year

NONE